

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P. E. CLASSIFIER		2	7-10-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	rk		11-13-02

# INDEX OF CLAIMS

☒ Rejected  
☐ Allowed  
☐ Canceled  
☐ Restricted  
☐ Non-elected  
☐ Interference  
☐ Appeal  
☐ Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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